

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04058

Entity Name: SUMMERFIELD MASTER COMMUNITY ASSOCIATION, INC.**Current Principal Place of Business:**2870 SCHERER DRIVE N.
SUITE 100
ST. PETERSBURG, FL 33716**Current Mailing Address:**2870 SCHERER DRIVE N.
SUITE 100
ST. PETERSBURG, FL 33716 US**FEI Number:** 59-2479864**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DICKEY, ERIC W ESQ.
410 S WARE BLVD STE 606
TAMPA FL 33619 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:** RAMPART

04/09/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	ABRUZZESE, ROBERT
Address	2870 SCHERER DRIVE N. SUITE 100
City-State-Zip:	ST. PETERSBURG FL 33716

Title	VP
Name	DICKEY, STEVEN
Address	2870 SCHERER DRIVE N. SUITE 100
City-State-Zip:	ST. PETERSBURG FL 33716

Title	SECRETARY
Name	JAEGER, JOSEPH
Address	2870 SCHERER DRIVE N. SUITE 100
City-State-Zip:	ST. PETERSBURG FL 33716

Title	TREASURER
Name	MIDKIFF, RONNIE
Address	2870 SCHERER DRIVE N. SUITE 100
City-State-Zip:	ST. PETERSBURG FL 33716

Title	DIRECTOR
Name	FRANCE, ANNY
Address	2870 SCHERER DRIVE N. SUITE 100
City-State-Zip:	ST. PETERSBURG FL 33716

Title	DIRECTOR
Name	PERSON, DALE
Address	2870 SCHERER DRIVE N. SUITE 100
City-State-Zip:	ST. PETERSBURG FL 33716

Title	DIRECTOR
Name	GARCIA, MARIO
Address	2870 SCHERER DRIVE N. SUITE 100
City-State-Zip:	ST. PETERSBURG FL 33716

Title	LCAM
Name	JAMES, ABI
Address	2870 SCHERER DRIVE N. SUITE 100
City-State-Zip:	ST. PETE FL 33716

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ABI JAMES

LCAM

04/09/2015

Electronic Signature of Signing Officer/Director Detail

Date